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**CONFIRMATION NO. 4193** 

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lb R. Odde  ** CONTINUING  This appln	rson,  DATA  claim	ith, Bothell, WA; Kirkland, WA; A ***********************************	,* 7 03/18/2	2003 M Nonl M ED.+ SMALL E		N			
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Foreign Priority claime 35 USC 119 (a-d) con met Verified and Acknowledged	STATE OR COUNTRY WA	SHEETS TOT DRAWING CLA 11 8		MS	INDEPENDENT CLAIMS 1				
ADDRESS DEAN A. CRAINE STE 140 400 - 112TH AVE BELLEVUE, WAS	NE								
TITLE Sanitary hairdress	ser in	nplement holder							
						☐ All Fees			
					☐ 1.16 Fees ( Filing )				
RECEIVED	No	: Authority has been gi	aper POSIT ACCOU	ACCOUNT		☐ 1.17 Fees ( Processing Ext. of time )			
385	No for following:					□ 1.1	18 Fees (Issue)		
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